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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/680,968	<b>FILING DATE</b> 10/06/2000 <b>RULE</b> -	<b>CLASS</b> 348	<b>GROUP ART UNIT</b> 2612	<b>ATTORNEY DOCKET NO.</b> 198246US2S
<b>APPLICANTS</b> Yoshitaka Egawa, Yokohama-shi, JAPAN; Shinji Ohsawa, Ebina-shi, JAPAN; Yukio Endo, Yokohama-shi, JAPAN; Nobuo Nakamura, Yokohama-shi, JAPAN;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/18/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 18	<b>TOTAL CLAIMS</b> 8
<b>INDEPENDENT CLAIMS</b> 3				
<b>ADDRESS</b> 22850				
<b>TITLE</b> Solid-state imaging device				
<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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## \*BIBDATASHEET\*

CONFIRMATION NO. 9558

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SERIAL NUMBER 09/680,968	FILING DATE 10/06/2000  RULE	CLASS 348	GROUP ART UNIT 2615	ATTORNEY DOCKET NO. 198246US2S
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## APPLICANTS

Yoshitaka Egawa, Yokohama-shi, JAPAN;

Shinji Ohsawa, Ebina-shi, JAPAN;

Yukio Endo, Yokohama-shi, JAPAN; Nobuo Nakamura, Yokohama-shi, JAPAN;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN @ 11-286469 10/7/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/18/2000

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	JAPAN	18	8	3

## ADDRESS

22850  
 OBLON, SPIVAK, MCCLELLAND, MAIER & NEUSTADT, P.C.  
 1940 DUKE STREET  
 ALEXANDRIA, VA  
 22314

## TITLE

Solid-state imaging device

FILING FEE  RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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